

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. <i>Booker</i>	FILING DATE
						APPLICANT'S	10/030877
CLAIMS							
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
IND.	DER.	IND.	DER.	IND.	DER.	IND.	DER.
1		1					
2		1					
3	2	1					
4	0	1					
5		1					
6	0	1					
7	0	1					
8	0	1					
9		1					
10		1					
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12		1					
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47							
48							
49							
50							
TOTAL IND.	3		3				
TOTAL DER.	12	↑↓	9	↑↓			
TOTAL CLAIMS	15	11					
MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS							